

MH/MR/DD/BI Redesign: An Overview

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Overview

- Charge to Commission
- Overview of Original Recommendations (1-23-04)
- Recent Review of Recommendations
- Overview of Children's System Recommendations

HF 529 (Expectation that Recommendations:)

- Assure that individuals with MI,MR, DD or BI have access to services regardless of where they live
- Assure that individuals have access to to available funding, based on individual needs
- Statewide standards for clinical and financial eligibility

HF 529

- Establish a minimum set of core services that will be funded for eligible individuals based on their individual unmet needs
- A new funding process that equalizes distribution of MH/MR/DD/BI funds

Original Commission Report

- January, 2004
- Implementation over 6 - 8 years
- Recommends Change of System

Change of System

- Providing better access to services
- Funding core services to more people statewide
- Equalizing county funding obligations
- Distributing funds on a more equitable basis

Access

“Funds will be available where each individual resides and will not be determined on an archaic calculation of ‘legal settlement.’ While this does not assure that each core service will be available in every locality, it does assure equal access to services.”

Funding

“Funds for the adult disability system will come from county property taxes, state appropriations, federal funds and other sources. Counties will contribute at an equalized property tax threshold. State and federal funds will be distributed to counties or coalitions of counties using case rates based on functional assessments of eligible individuals. This assures that individuals will have access to available funding based on their individual needs.” 2

Vision

- To build and implement a coordinated system
- Individuals receive necessary, high quality services and supports
- Equitable, timely and convenient basis
- Persons live, learn, work, recreate and contribute to chosen communities

Recent Review (10/06)

- Choice
- Empowerment
- Community

Choice

“The ability of lowans with disabilities and their families to make informed choices about the amounts and types of services and support received based on need.”

Eligibility

- “The Commission recommends adopting, with consumer input, statewide standardized functional assessment tools to be used to establish both system funding eligibility and the level of services and supports that an individual needs.”

Vision for Children's System

- All Iowa children with serious emotional disturbances, mental retardation, developmental disabilities and brain injury (SED/MR/DD/BI) and their families will have access to a statewide system of care that is child-focused, family-driven, flexible and coordinated with effective, quality services supported by sufficient funding and a structure to assure families are supported and children reach their greatest potential.

Proposed Components of A System

- Information and Referral
- System Navigator
- Coordinated Care Plan
 - Services
 - Supports
 - Resources
- Governance

Challenges We Face

- Looking Beyond Past Solutions: From Beds to Services!
- Understanding and Defining Meaningful Outcomes (Evidence-Based Interventions) (Symptom Reduction/Functional Outcomes)
- Reducing Disparities in Our State (Regional Services)
- “Potential Cost” As A Reason for Inaction (What would we expect for ourselves, our parents, children, grandchildren?)

A System of Care That: (Our Commission Values)

- Is consumer and family driven
- Improves service quality and increases positive results, including employment, interpersonal relationships, and community participation
- Reduces system disparities